

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Rick Kozell for Congress

ADDRESS (number and street)  
▼

PO Box 2172

Check if different  
than previously  
reported. (ACC)

Jupiter

FL

33468-2172

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00579102

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

FL

18

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul Kilgore

Signature of Treasurer

Paul Kilgore

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

01

29

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

Rick Kozell for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	121212.00	298612.02
(b) Total Contribution Refunds (from Line 20(d)) .....	1850.00	3350.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	119362.00	295262.02
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	45821.56	74271.86
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	45821.56	74271.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	221053.69	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Rick Kozell for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

110314.00

266314.00

(ii) Unitemized.....

5398.00

20798.02

(iii) TOTAL of contributions from individuals ▶

115712.00

287112.02

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

5500.00

11500.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

121212.00

298612.02

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

100.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

100.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

36.04

63.53

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

121248.04

298775.55

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	45821.56	74271.86
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	100.00	100.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	100.00	100.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	1850.00	3350.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1850.00	3350.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	47771.56	77721.86

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	147577.21
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	121248.04
25. SUBTOTAL (add Line 23 and Line 24).....	268825.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	47771.56
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	221053.69

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 68

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Patrick Laconte**

Mailing Address 3933 SE Fairway East

City	State	Zip Code
Stuart	FL	34997-6121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

**Transaction ID : A5B45723D25884E3B943**

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
**Clayton Fischer**

Mailing Address 18873 SE Jupiter River Dr

City	State	Zip Code
Jupiter	FL	33458-1011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Woodland Construction Company, Inc.Occupation  
Contractor

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

**Transaction ID : AFE52EF1622134E6C90D**

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Paul Constantine**

Mailing Address 49 St. George Place

City	State	Zip Code
Palm Beach Gardens	FL	33418-4024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2015

**Transaction ID : AA79D247422134B4FA11**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

Helen Hunting

A.

Mailing Address 12012 East End

City

North Palm Beach

State

FL

Zip Code

33408-2903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : A848B9D95683D483187B

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Robert Nederlander

B.

Mailing Address 270 Kawama Ln

City

Palm Beach

State

FL

Zip Code

33480-3615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : A6BA8AA175C2D42E8A05

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Lincoln Diaz-Balart

C.

Mailing Address 611 Ocean Dr Apt 7F

City

Key Biscayne

State

FL

Zip Code

33149-2316

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Diaz-Balart, PLLCOccupation  
Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Transaction ID : A64DB1CDFA0444FB9B50

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Victoria Carson****A.**

Mailing Address 1900 SW Hackman Ter

City  
StuartState  
FLZip Code  
34997-7094FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

**Transaction ID : A2C0B2207DB974F19A31**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Charlotte Marden****B.**

Mailing Address 2 N Breakers Row, N43

City  
Palm BeachState  
FLZip Code  
33480-3987FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2015

**Transaction ID : A1619458543C14F6B9EB**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**J.H. Iravani, Inc.****C.**

Mailing Address 1934 Commerce Lane Ste 5

City  
JupiterState  
FLZip Code  
33458-5576FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

**Transaction ID : AF79E486AE4CF49708C2**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

Barbara Smith

A.

Mailing Address 885 Third Ave

19th Floor

City

New York

State

NY

Zip Code

10022-4834

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Investor

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : A73CF8898A1C44E4FA90

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

Joseph Charles

B.

Mailing Address 3360 Barrow Island Rd

City

Jupiter

State

FL

Zip Code

33477-1379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : A4EE731A3AF6F43D986A

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

John Bills

C.

Mailing Address 3950 RCA Blvd

Ste 5000

City

Palm Beach Gardens

State

FL

Zip Code

33410-4265

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2015

Transaction ID : A0B48AA7819E2474B833

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Charles Spies****A.**

Mailing Address 7406 Park Terrace Dr

City

Alexandria

State

VA

Zip Code

22307-2039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Clark Hill PLC

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : AADEA772B90F247BBACF

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

**Virginia Bills****B.**Mailing Address 3920 RCA Blvd  
Ste 2002

City

Palm Beach Gardens

State

FL

Zip Code

33410-4263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2015

Transaction ID : A3F17DA52A34E4C84AA7

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Jo Ann Jacobson****C.**

Mailing Address 19297 N Riverside Dr

City

Jupiter

State

FL

Zip Code

33469-2552

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A2EB397B026F54D2B8AA

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Sarah Pietrafesa**

Mailing Address 16 St. George Place

City

Palm Beach Gardens

State

FL

Zip Code

33418-4023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2015

Transaction ID : AAE2E47D6AC7B4BADA7E

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Franklyn Demarco**

Mailing Address 1098 N Lake Way

City

Palm Beach

State

FL

Zip Code

33480-3252

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Taboo Restaurant

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Transaction ID : AE8ABE61D4A2C401C928

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Fred Zeidman**

Mailing Address 3719 Olympia

City

Houston

State

TX

Zip Code

77019-3029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : A6ACECB179F7F4735B30

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Joan Javits Freeman**

Mailing Address 230 Palmo Way

City

Palm Beach

State

FL

Zip Code

33480-3135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : A3E51838CE4F74ADDAF4

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Sam Fox**Mailing Address 7701 Forsyth Blvd  
Ste 600

City

Saint Louis

State

MO

Zip Code

63105-1875

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : A18DCB1EB91B846BAB2D

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**Jeffrey Hahn**

Mailing Address PO Box 276310

City

Boca Raton

State

FL

Zip Code

33427-6310

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jeffrey Hahn CPA P.A.Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A46009146A5804E9396F

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3450.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 68

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**David Armellini**

Mailing Address 128 NE Alice St

City

Jensen Beach

State

FL

Zip Code

34957-6004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : ADA00C5A084CB4EBF9A4

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Richard Wackenhut**

Mailing Address 930 S Ocean Blvd

City

Palm Beach

State

FL

Zip Code

33480-4909

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2015

Transaction ID : A9CC4858F46694645869

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**Melissa Nash**Mailing Address 610 Clematis St #318  
318

City

West Palm Beach

State

FL

Zip Code

33401-5394

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ARIOccupation  
President

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A7BF59028DB5F4EADAA4

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Timothy Taylor**

Mailing Address 5228 SW Anhinga Ave

City

Palm City

State

FL

Zip Code

34990-4043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sunshine Land Design, Inc.

Occupation

Contractor

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 01 2015

Transaction ID : A2FB8CC4CCEAD495EB8D

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Alvan Balent**

Mailing Address 333 Las Olas Way, #210

City

Fort Lauderdale

State

FL

Zip Code

33301-2374

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Florida Judicial Circuit Court

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2015

Transaction ID : AA7FF2DE4877843D4B6A

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**Dale Hedrick**

Mailing Address 2200 Centrepark West Dr

City

West Palm Beach

State

FL

Zip Code

33409-6473

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hedrick Brothers Construction

Occupation

President

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 09 2015

Transaction ID : A576CA45863574A93A18

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1050.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Bradford Wheler****A.**

Mailing Address PO Box 403

City

Cazenovia

State

NY

Zip Code

13035-0403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		14		2015

**Transaction ID : AE4C2C58520174D47950**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Denis Coleman****B.**

Mailing Address PO Box 2615

City

Palm Beach

State

FL

Zip Code

33480-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		29		2015

**Transaction ID : AA2219CBD756442A9B70**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**George Speer****C.**

Mailing Address 5139 Magnolia Bay Circle

City

Palm Beach Gardens

State

FL

Zip Code

33418-6735

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kitson and Partners

Occupation

Accountant

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		08		2015

**Transaction ID : A084D4A07929449E79C1**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Adam Zborowski**

Mailing Address 1845 Tudor Road

City

North Palm Beach

State

FL

Zip Code

33408-2434

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Nugent Zborowski &amp; Bruce

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : AA880794325404763B48

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Harout Samra**

Mailing Address 445 Sevilla Avenue

City

Coral Gables

State

FL

Zip Code

33134-5712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DLA Piper LLP

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : ADD3F86FB9F5A4B84A08

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Brian Harris**

Mailing Address 4115 W Knights Ave

City

Tampa

State

FL

Zip Code

33611-1360

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Akerman LLP

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : A6F8DEBB6F42C42D2AED

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Jeff Fox****A.**

Mailing Address 7701 Forsyth Blvd

City

Saint Louis

State

MO

Zip Code

63105-1818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Harbour Group

Occupation

CEO

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

**Transaction ID : A8B8059B9947846E9B23**

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**Lewis Crampton****B.**

Mailing Address 2335 S Ocean Blvd

City

Palm Beach

State

FL

Zip Code

33480-5368

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Florida Science Center

Occupation

Museum Director

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

**Transaction ID : AF0F81AFD62FE489A888**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**David Mack****C.**

Mailing Address 2115 Linwood Ave

City

Fort Lee

State

NJ

Zip Code

07024-5020

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

**Transaction ID : AE9D68CA78F644E5682C**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4200.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**George Lindemann**

Mailing Address 505 S Flagler Dr Ste 900

City

West Palm Beach

State

FL

Zip Code

33401-5948

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : A0E058FD249164CD1964

Amount of Each Receipt this Period

1700.00

Full Name (Last, First, Middle Initial)

**Jeff Fox**

Mailing Address 7701 Forsyth Blvd

City

Saint Louis

State

MO

Zip Code

63105-1818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Harbour Group

Occupation

CEO

Receipt For: 2016

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A852D3EE6BC41442C983

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**Donna Fullwood**

Mailing Address 18163 SE Ridgeview Dr

City

Jupiter

State

FL

Zip Code

33469-8122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Transaction ID : A748DBFCA230C45888EE

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4700.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

A. Gary Rager

Mailing Address 316 Daly Rd

City

Jupiter

State

FL

Zip Code

33469-3009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : A1F80A66DDA384C059A5

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Sara McKenna

Mailing Address 232 Mockingbird Trail

City

Palm Beach

State

FL

Zip Code

33480-3118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TeladocOccupation  
Sales Executive

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2015

Transaction ID : A2CF125BB07634DA196A

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. David Rosow

Mailing Address 1460 N Lake Ave

City

Palm Beach

State

FL

Zip Code

33480-3031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : A248E6438FA8A4124B2B

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

A. Stuart Sandler

Mailing Address 2420 Mulberry Court

City

Ann Arbor

State

MI

Zip Code

48104-6390

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Grand River StrategiesOccupation  
Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A2F584947B1C84DAF843

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Marilyn Fox

Mailing Address 7701 Forsyth Blvd  
Ste 600

City

Saint Louis

State

MO

Zip Code

63105-1875

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : A77BFB5054AAD4D2F950

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

C. Frayda Lindemann

Mailing Address 505 South Flagler Dr, Ste 900

City

West Palm Beach

State

FL

Zip Code

33401-5948

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4714.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : A47F1DC8D92BB4758BDA

Amount of Each Receipt this Period

2014.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4964.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 68

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Jean Rosow</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2015	
Mailing Address 1460 N Lake Way			<b>Transaction ID : A052C48358E6E4698BD5</b>	
City	State	Zip Code		
Palm Beach	FL	33480-3031		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 1000.00	
Name of Employer None		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Stuart Sandler</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2015	
Mailing Address 2420 Mulberry Court			<b>Transaction ID : AFEE7F3A435F646A6946</b>	
City	State	Zip Code		
Ann Arbor	MI	48104-6390		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 750.00	
Name of Employer Grand River Strategies		Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>William Moore</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2015	
Mailing Address 11980 Turtle Beach Rd			<b>Transaction ID : ABFDCB24E27A24797B6A</b>	
City	State	Zip Code		
North Palm Beach	FL	33408-2937		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 500.00	
Name of Employer None		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			2250.00	
<b>TOTAL</b> This Period (last page this line number only).....				

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Lawrence Moens</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 29 / 2015	
Mailing Address 245 Sunrise Avenue		<b>Transaction ID : A2D8913F7EED341728D3</b>	
City Palm Beach	State FL	Zip Code 33480-3812	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Lawrence A Moens Associates, Inc	Occupation Broker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Richard Armellini</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 16 / 2015	
Mailing Address 1346 SW Dyer Point Rd		<b>Transaction ID : A2EB234F2947F48BC912</b>	
City Palm City	State FL	Zip Code 34990-4222	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Theresa Fasani</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2015	
Mailing Address 17032 Grande Reserve PI		<b>Transaction ID : AD7613CAA24B540C7A17</b>	
City Lutz	State FL	Zip Code 33548-7205	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		2250.00	
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Melissa Nash**

Mailing Address 610 Clematis St #318

318

City

West Palm Beach

State

FL

Zip Code

33401-5394

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARI

Occupation

President

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Transaction ID : A02C1DB62A962401BAAE

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Denis Coleman**

Mailing Address PO Box 2615

City

Palm Beach

State

FL

Zip Code

33480-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : A2420C91BBB6F48CF89B

Amount of Each Receipt this Period

2200.00

Full Name (Last, First, Middle Initial)

**David Brodsky**

Mailing Address 259 Clarke

City

Palm Beach

State

FL

Zip Code

33480-6124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2015

Transaction ID : AED7B24B5D6E44C6D8A0

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

David Doney

Mailing Address 3006 W Chapin Ave

City

Tampa

State

FL

Zip Code

33611-1637

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Akerman LLP

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A8E86135F9F574D9D853

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Ed Sasso

Mailing Address 18200 Gardiner Lane

City

Jupiter

State

FL

Zip Code

33458-4347

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EDS Air Conditioning

Occupation

Air conditioning

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : AE28A5E18262C4F84A55

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Gwen Fisher

Mailing Address 10 Lincoln Ln

City

Purchase

State

NY

Zip Code

10577-2304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : AFD00D265EDD642D2833

Amount of Each Receipt this Period

2700.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3450.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William J Diamond**

Mailing Address 220 Wells Rd

City State Zip Code  
Palm Beach FL 33480-3625

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2015

Transaction ID : AEAC6BF06857441C7962

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mel Sembler**

Mailing Address 5858 Central Ave

City State Zip Code  
Saint Petersburg FL 33707-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested  
Self-Employed Real Estate Developer

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : A1A8E2BDABE8A4F50BE8

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Janelle Beruff**

Mailing Address 632 Regatta Way

City State Zip Code  
Bradenton FL 34208-8438

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested  
Self-Employed Engineer

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2015

Transaction ID : A0E93C2B9C0FD4132A2E

Amount of Each Receipt this Period

2700.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3950.00
---------



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Jason Miller**

Mailing Address 2305 N. Lincoln St.

City  
Arlington

State  
VA

Zip Code  
22207-3856

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jamestown Associates

Occupation  
Consultant

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
12 31 2015

Transaction ID : AF6690ED6355A4AA588E

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**Rhonda Nasser**

Mailing Address 249 Peruvian Ave #R2

City  
Palm Beach

State  
FL

Zip Code  
33480-6036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Dentist

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
12 18 2015

Transaction ID : AF995493AE4474BC5B52

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Harold Smith**

Mailing Address 200 W Madison St, Ste 3400

City  
Chicago

State  
IL

Zip Code  
60606-3600

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
12 16 2015

Transaction ID : A574FBC8ABEC742B89E5

Amount of Each Receipt this Period

2700.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5900.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Judith Lewent**

Mailing Address 150 Bradley Place #802

City State Zip Code  
Palm Beach FL 33480-3846

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt

M M / D D / Y Y Y Y  
12 31 2015

Transaction ID : AF35B393411B94EF7B04

Amount of Each Receipt this Period

2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Judith Dusharm**

Mailing Address 1230 SW Dyer Point Rd

City State Zip Code  
Palm City FL 34990-4220

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
11 16 2015

Transaction ID : A320A082C40FB4E12AE1

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
**Stuart Bernstein**

Mailing Address 300 Seminole Ave 3B

City State Zip Code  
Palm Beach FL 33480-3736

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 31 2015

Transaction ID : A75A352C54E9E40BEBA6

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

Jeff Iravani

A.

Mailing Address 177708 50th Street N

City

Loxahatchee

State

FL

Zip Code

33470

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2015

Transaction ID : AA23E924684CC4996A96

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

F Martin Perry

B.

Mailing Address 4500 PGA Blvd, Ste 204

City

Palm Beach Gardens

State

FL

Zip Code

33418-3965

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2015

Transaction ID : A214BB65C439148C3904

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Charles G Goldsmith

C.

Mailing Address 333 Sodset, #707

City

Palm Beach

State

FL

Zip Code

33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		15		2015

Transaction ID : A82D12DB3565748BD879

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Henry McIntosh**

Mailing Address 124 Via Bethesda

City State Zip Code  
 Palm Beach FL 33480-6110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 None Retired

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 11 2015

Transaction ID : AEC9556D4485D4D11AF7

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jon Schmidt**

Mailing Address 123 Point Cir

City State Zip Code  
 Jupiter FL 33469-1928

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Information Requested Information Requested

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 18 2015

Transaction ID : A8B316A0E9582470EBC4

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard Eliasberg**

Mailing Address 7 St Paul St  
 Ste 290

City State Zip Code  
 Baltimore MD 21202-1626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Information Requested Information Requested

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 07 2015

Transaction ID : A2310950C565049B88B5

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Buck**  
Mailing Address 2932 SW Newberry Ct

City State Zip Code  
Palm City FL 34990-3223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The MORGAN Great

Occupation  
Real Estate Development

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
11 18 2015

Transaction ID : A28DDA3FDEB914F059F1

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
**Herbert Jacobi**  
Mailing Address 3207 Buccaneer Rd

City State Zip Code  
Lake Worth FL 33462-3705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3700.00

Date of Receipt

M M / D D / Y Y Y Y  
12 31 2015

Transaction ID : AF174AD4F876C46029AD

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Tyler B Pahl**  
Mailing Address 300 Uno Lago Dr, Apt 301

City State Zip Code  
North Palm Beach FL 33408-2687

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TYDAN Construction Inc.

Occupation  
General Contractor

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
12 18 2015

Transaction ID : AE81D3A45135D475E87A

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1850.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Sharon Smith**

Mailing Address 23 Soundview Dr

City

Westport

State

CT

Zip Code

06880-6844

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : A69AEA98C048B43998A7

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Annabelle Coleman**

Mailing Address 662 Island Dr

City

Palm Beach

State

FL

Zip Code

33480-4745

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2015

Transaction ID : A2F4807045BE54875A06

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**Hugo deBeaublen**

Mailing Address 2910 W San Rafael

City

Tampa

State

FL

Zip Code

33629-6023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : ACA11EA3E9062410A980

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Sheila Tierney**

Mailing Address 8 Oakland Ct

City

Jupiter

State

FL

Zip Code

33469-2744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2015

Transaction ID : A2A99380C2E454AA0957

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Judith Lewent**

Mailing Address 150 Bradley Place #802

City

Palm Beach

State

FL

Zip Code

33480-3846

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2015

Transaction ID : A122DE0CA030C4A188E7

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**Herbert Jacobi**

Mailing Address 3207 Buccaneer Rd

City

Lake Worth

State

FL

Zip Code

33462-3705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 05 2015

Transaction ID : A34A3F65CCAAC4349982

Amount of Each Receipt this Period

2700.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5650.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

James Broadhead

Mailing Address 1245 Lake House Dr

City

North Palm Beach

State

FL

Zip Code

33408-3370

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : ABEE29C3F633540EA806

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Michael Dyer

Mailing Address 4347 SW LaPaloma Drive

City

Palm City

State

FL

Zip Code

34990-7948

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BMO Harris Bank NAOccupation  
Bank Manager

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : A275800CEF22F4E0994E

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Brad Shattuck

Mailing Address 333 West Vine Street

City

Lexington

State

KY

Zip Code

40507-1622

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Strategic ImpactOccupation  
Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A2ADB2D9C808740B3BC3

Amount of Each Receipt this Period

1200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3950.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 68

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Brian Kulju**

Mailing Address 450 Alton Rd, Apt 607

City

Miami Beach

State

FL

Zip Code

33139-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Iconic Properties Inc.Occupation  
Real Estate

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : A023F5FE4D2924938842

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Matthew Corbett**

Mailing Address 2121 Allen Pkwy, Apt 4066

City

Houston

State

TX

Zip Code

77019-2458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Freepoint CommoditiesOccupation  
Energy Analyst

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		28		2015

Transaction ID : A1590191062EF4877882

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Richard Katz Jr.**

Mailing Address 136 Spyglass Lane

City

Jupiter

State

FL

Zip Code

33477-4037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		29		2015

Transaction ID : A989A8054FE2B4E51A7F

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 34 OF 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Paul DiMare****A.**

Mailing Address PO Box 900460

City

Homestead

State

FL

Zip Code

33090-0460

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

**Transaction ID : A54EF416EEB8F4CCA8B9**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Steven Truta****B.**

Mailing Address 12441 Verandah Blvd

City

Fort Myers

State

FL

Zip Code

33905-6200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

**Transaction ID : A942D21F37DE645B3AE6**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Armellini Express Lines, Inc.****C.**

Mailing Address PO Box 678

City

Palm City

State

FL

Zip Code

34991-0678

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

**Transaction ID : A2BCD7C8563FA421EA5B**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 35 OF 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

Howard Rensin

A.

Mailing Address 6521 140th Ln N

City

West Palm Beach

State

FL

Zip Code

33418-7244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2015

Transaction ID : A2A4C2CBCF91C472DA9A

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Earle Mack

B.

Mailing Address 2115 Linwood Ave Ste 110

City

Fort Lee

State

NJ

Zip Code

07024-5022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Mack Company

Occupation

Senior Partner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Transaction ID : A74757A725D68474A93A

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Frayda Lindemann

C.

Mailing Address 505 South Flagler Dr, Ste 900

City

West Palm Beach

State

FL

Zip Code

33401-5948

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2015

Transaction ID : AB70B87AE3A9148BC960

Amount of Each Receipt this Period

400.00

In-kind: Event Catering

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1650.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Patricia Kulju**

Mailing Address 3405 Route 430

City

Bemus Point

State

NY

Zip Code

14712-9508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2015

Transaction ID : A4A0B1293005E4984B35

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**John Everett**

Mailing Address 6808 SW Wedelia Terr

City

Palm City

State

FL

Zip Code

34990-8353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Everett Brothers Recycling

Occupation

President

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A9DCBA3EDF95542979FD

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Jane Woodman**

Mailing Address 233 Mockingbird Trail

City

Palm Beach

State

FL

Zip Code

33480-3117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : AED0A9BF6FF3944BFB09

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 68

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Forward Electric and Air Conditioning**

Mailing Address PO Box 2172

City

Jupiter

State

FL

Zip Code

33468-2172

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2015

Transaction ID : A838F6B5B579A4218B5B

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Allan Scherer**

Mailing Address 417 Primavera Way

City

Palm Beach

State

FL

Zip Code

33480-4106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : A742A32A43CF4086A51

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Amanda Schumacher**

Mailing Address 105 Clarendon Ave

City

Palm Beach

State

FL

Zip Code

33480-4905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

CEO

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : AD199E927C2764533B03

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

700.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

Marilyn Fox

Mailing Address 7701 Forsyth Blvd  
Ste 600

City	State	Zip Code
Saint Louis	MO	63105-1875

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : AF7F9FB160E514F6781D

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

Daniel Seigel

Mailing Address 340 W Palmetto Park Rd, 210B

City	State	Zip Code
Boca Raton	FL	33432-3785

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Law Offices of Daniel A Seigel

Occupation  
Lawyer

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

Transaction ID : A76983BAB74814B949C3

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Gwen Fisher

Mailing Address 10 Lincoln Ln

City	State	Zip Code
Purchase	NY	10577-2304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : A9DA002CC06284752991

Amount of Each Receipt this Period

2700.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5650.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 39 OF 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Carlos Beruff****A.**

Mailing Address 2212 58th Ave East

City

Bradenton

State

FL

Zip Code

34203-5062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

**Transaction ID : A1A06D4160A494E0D974**

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**Margaret Zeidman****B.**

Mailing Address 229 Barton Ave

City

Palm Beach

State

FL

Zip Code

33480-6115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

**Transaction ID : AE8AB61B7799D49739CB**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Nancy Tsai****C.**

Mailing Address 150 Bradley Place

City

Palm Beach

State

FL

Zip Code

33480-3804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

**Transaction ID : A173F441E6CC74E3DB9B**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3450.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 68

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**A. Amanda Schumacher**

Mailing Address 105 Clarendon Ave

City

Palm Beach

State

FL

Zip Code

33480-4905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

CEO

Receipt For: 2016

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : A15B085332EC4DBBACF

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

**B. Priscilla Richman**

Mailing Address 179 East Lake Shore Dr

City

Chicago

State

IL

Zip Code

60611-1340

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : A0079805574DE4891A9F

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Berny Jacques**Mailing Address 6150 Gulfport Blvd  
Apt 416

City

Gulfport

State

FL

Zip Code

33707-3180

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : AD17CE8ABAB9B49C5B30

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3450.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Edward Sasso**

Mailing Address 340 S US Hwy 1, Apt 607

City

Jupiter

State

FL

Zip Code

33477-5932

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mosco Air Conditioning

Occupation  
Contractor

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

M M / D D / Y Y Y Y  
12 29 2015

Transaction ID : ACD72F6CA06754A15A37

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Paul Dittmar**

Mailing Address 4479 SE Sweetwood Way

City

Stuart

State

FL

Zip Code

34997-2257

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
12 31 2015

Transaction ID : A84587BEC7AB342D3BE6

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Linda Santos**

Mailing Address 624 Sportsman Park Dr

City

Seffner

State

FL

Zip Code

33584-4170

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
12 09 2015

Transaction ID : A648430699978425CA68

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 42 OF 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

A. Matt Rostock

Mailing Address 19865 North 198th Place

City

Jupiter

State

FL

Zip Code

33458-1823

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : AE4EB06E5ACEB4CBB9BE

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Peter Dayton

Mailing Address 14 Palm Court

City

Stuart

State

FL

Zip Code

34996-6603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : A2F37F16989C44650A35

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Allen Wyett

Mailing Address 1145 N Lake Way

City

Palm Beach

State

FL

Zip Code

33480-3248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : A6F86CA5E3C504378940

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 68

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Catherine Finn**

Mailing Address 11280 Turtle Beach Rd, 2B

City

North Palm Beach

State

FL

Zip Code

33408-3335

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

**Transaction ID : A43A6A79C1528410784E**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**James Alban**

Mailing Address 249 West Indies Dr

City

Palm Beach

State

FL

Zip Code

33480-3408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

**Transaction ID : A35CE4F5855E84017979**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Marc Goldman**

Mailing Address 1500 S Ocean Blvd

City

Boca Raton

State

FL

Zip Code

33432-8529

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2015

**Transaction ID : A4E97562B06DF40B6B6E**

Amount of Each Receipt this Period

2700.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 68

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**Robert Rennebaum**

Mailing Address 928 Shore Dr

City

North Palm Beach

State

FL

Zip Code

33408-4240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : AB010A95827CF48899E8

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Robert Quinn**

Mailing Address 1262 Lake House Dr

City

North Palm Beach

State

FL

Zip Code

33408-3371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : AC657BC92D9F041E4922

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Stephen Bohner**

Mailing Address 17 W High Point Rd

City

Stuart

State

FL

Zip Code

34996-7021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Premier Realty GroupOccupation  
Real Estate

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : A0C13B6E079354AD6AE5

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 45 OF 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Rick Kozell for Congress**

Full Name (Last, First, Middle Initial)

**John Richman**

Mailing Address 179 East Lake Shore Dr, #301

City

Chicago

State

IL

Zip Code

60611-1340

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2015

Transaction ID : AF230BF9123DD40B2886

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Shipwreck Bar & Grille, LLC**

Mailing Address 1511 N Old Dixie Hwy

City

Jupiter

State

FL

Zip Code

33469-3203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : A9D6761421C124393924

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Scott Thomson**

Mailing Address 19788 Hibiscus Dr

City

Jupiter

State

FL

Zip Code

33469-2193

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shipwreck Bar &amp; Grille, LLC

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : A5ECE29DF92C5484EB49

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**

Partnership: Shipwreck Bar &amp; Grille, LLC

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

110314.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Rick Kozell for Congress**Full Name (Last, First, Middle Initial)  
**LEADERS ONLY UNITE POLITICAL ACTION COMMITTEE AKA LOU PAC**

Mailing Address PO BOX 2485

City	State	Zip Code
SPRINGFIELD	VA	22152

FEC ID number of contributing  
federal political committee.**C** C00564369

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2015

Transaction ID : A60F61555441740CCACD

Amount of Each Receipt this Period

500.00

**B. Full Name (Last, First, Middle Initial)****G4S SECURE SOLUTIONS (USA) PAC**

Mailing Address 1395 UNIVERSITY DRIVE

City	State	Zip Code
Jupiter	FL	33458-5289

FEC ID number of contributing  
federal political committee.**C** C00165365

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2015

Transaction ID : A49AE247D139842CFBD6

Amount of Each Receipt this Period

2500.00

**C. Full Name (Last, First, Middle Initial)****G4S SECURE SOLUTIONS (USA) PAC**

Mailing Address 1395 UNIVERSITY DRIVE

City	State	Zip Code
Jupiter	FL	33458-5289

FEC ID number of contributing  
federal political committee.**C** C00165365

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2015

Transaction ID : A49B8D6A8D76E4B2E97F

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

5500.00

**TOTAL** This Period (last page this line number only).....

5500.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Frayda Lindemann**

Mailing Address 505 South Flagler Dr, Ste 900

City	State	Zip Code
West Palm Beach	FL	33401-5948

Purpose of Disbursement  
In-kind: Event Catering

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 11 / 2015

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : BB70B87AE3A9148BC960

**B. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 06 / 2015

Amount of Each Disbursement this Period

7.10
------

Transaction ID : B0F56DD5168DD49D2A88

**c. Front Street Consulting**

Mailing Address 3551 Blairstone Rd, Ste 128-203

City	State	Zip Code
Tallahassee	FL	32301-8826

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 12 / 2015

Amount of Each Disbursement this Period

4500.00
---------

Transaction ID : B463338804A32416BA72

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4907.10

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 24 / 2015

Amount of Each Disbursement this Period

17.75
-------

Transaction ID : B7AEC4E0079D2453E8A0

**B. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 26 / 2015

Amount of Each Disbursement this Period

17.75
-------

Transaction ID : B9E674DAD426C4E3696D

**c. Clark Hill PLC**

Mailing Address 150 N Michigan Ave, Ste 2700

City	State	Zip Code
Chicago	IL	60601-7576

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 26 / 2015

Amount of Each Disbursement this Period

9000.00
---------

Transaction ID : BD75189BEB0774F81A96

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9035.50



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Ave, SE

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement  
Database Software

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 26 / 2015

Amount of Each Disbursement this Period

575.00
--------

Transaction ID : B1DEC9041BE434B70BFB

**B. Professional Data Services, Inc.**

Mailing Address 824 S Milledge Ave, Ste 101

City	State	Zip Code
Athens	GA	30605-1332

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 26 / 2015

Amount of Each Disbursement this Period

3025.16
---------

Transaction ID : B70E30E8D18D64BC0850

**c. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 28 / 2015

Amount of Each Disbursement this Period

2.49
------

Transaction ID : B6745904042F5469CAF5

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3602.65

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2015

Amount of Each Disbursement this Period

7.10
------

Transaction ID : BF49EFBBD0CBB42168C7

**B. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		02		2015

Amount of Each Disbursement this Period

71.00
-------

Transaction ID : B4AD35F58DA0C40FDB26

**c. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		10		2015

Amount of Each Disbursement this Period

7.10
------

Transaction ID : B2F7D5A946FB3448785D

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

85.20

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	1		2	0	1	5

Amount of Each Disbursement this Period

1	4	.	2	0
---	---	---	---	---

Transaction ID : B7929255825CE49DB932

**B. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	1	5

Amount of Each Disbursement this Period

1	7	.	7	5
---	---	---	---	---

Transaction ID : BEC779D1C42A84B5F87A

**c. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	1	5

Amount of Each Disbursement this Period

3	5	.	5	0
---	---	---	---	---

Transaction ID : B5CC9E9F702724EA3956

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6	7	.	5	0
---	---	---	---	---

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2015

Amount of Each Disbursement this Period

10.65
-------

Transaction ID : BCA0FE390A2264E82BB4

**B. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

17.75
-------

Transaction ID : B5473C3A93C1E4977B72

**c. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		24		2015

Amount of Each Disbursement this Period

14.13
-------

Transaction ID : B848A8DD6CFDD4ABC932

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

42.53

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		24		2015

City	State	Zip Code
Alexandria	VA	22314-1547

Amount of Each Disbursement this Period

3675.00
---------

Transaction ID : BCAD46EFD9E9B48118AE

Purpose of Disbursement  
Web Services

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Ave, SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

City	State	Zip Code
Washington	DC	20003-1164

Amount of Each Disbursement this Period

575.00
--------

Transaction ID : BDEC434624AE34ECD8BC

Purpose of Disbursement  
Database Software

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. Professional Data Services, Inc.**

Mailing Address 824 S Milledge Ave, Ste 101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

City	State	Zip Code
Athens	GA	30605-1332

Amount of Each Disbursement this Period

1517.46
---------

Transaction ID : B3B66F77811FF4566BDB

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5767.46

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 01 / 2015

Amount of Each Disbursement this Period

35.50
-------

Transaction ID : BBA54EC36D835414BA30

**B. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 03 / 2015

Amount of Each Disbursement this Period

35.50
-------

Transaction ID : B3A3E300BF1664598B73

**c. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 04 / 2015

Amount of Each Disbursement this Period

1.78
------

Transaction ID : BC0D6D0A08B8D438EA75

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

72.78

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2015

City	State	Zip Code
Alexandria	VA	22314-1547

Amount of Each Disbursement this Period

191.70
--------

Purpose of Disbursement  
CC Transaction Fees

Transaction ID : BB9933FB22A8044BDBC8

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Ave, SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		07		2015

City	State	Zip Code
Washington	DC	20003-1164

Amount of Each Disbursement this Period

575.00
--------

Purpose of Disbursement  
Database Software

Transaction ID : BE429B562F1CD45CCB8F

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**c. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

City	State	Zip Code
Alexandria	VA	22314-1547

Amount of Each Disbursement this Period

24.85
-------

Purpose of Disbursement  
CC Transaction Fees

Transaction ID : B2E549053EA83462EBFA

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

791.55

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2015

Amount of Each Disbursement this Period

454.40
--------

Transaction ID : B58016EA8C77E4A6F926

**B. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2015

Amount of Each Disbursement this Period

71.00
-------

Transaction ID : B39C3191D86534040B68

**c. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2015

Amount of Each Disbursement this Period

35.50
-------

Transaction ID : BEBFE9F1636394D94BFA

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

560.90



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Anita Carbone**

Mailing Address 11 Thurston Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2015

City	State	Zip Code
Palm Beach Gardens	FL	33418-7095

Purpose of Disbursement  
Mileage

Amount of Each Disbursement this Period

47.56
-------

Transaction ID : BD268988135D64BBCBFF

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Clark Hill PLC**

Mailing Address 150 N Michigan Ave, Ste 2700

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2015

City	State	Zip Code
Chicago	IL	60601-7576

Purpose of Disbursement  
Legal Services

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : B309E7E33C7D840D6A50

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**c. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2015

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Amount of Each Disbursement this Period

191.70
--------

Transaction ID : BDB764A818B934EEDBCC

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3239.26

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 18 / 2015

Amount of Each Disbursement this Period

51.48
-------

Transaction ID : B28828090713442BB92C

**B. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 22 / 2015

Amount of Each Disbursement this Period

298.20
--------

Transaction ID : B59FF3249208F4140B86

**c. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 27 / 2015

Amount of Each Disbursement this Period

28.26
-------

Transaction ID : B7F9FEB8C8A394780862

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

377.94

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		28		2015

Amount of Each Disbursement this Period

88.75
-------

Transaction ID : B31550437E57F44728A6

**B. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		29		2015

Amount of Each Disbursement this Period

21.30
-------

Transaction ID : B39C0A3664FA44E03BAA

**c. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

138.45
--------

Transaction ID : B94C5E198079040FE865

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

248.50

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 68

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
CC Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 31 / 2015

Amount of Each Disbursement this Period

639.01
--------

Transaction ID : BAFE2AB7FD67E494E8B1

**B. Richard S Kozell III**

Mailing Address 353 US Hwy 1 #D106

City	State	Zip Code
Jupiter	FL	33477-5964

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Richard S Kozell III

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 30 / 2015

Amount of Each Disbursement this Period

76.75
-------

Transaction ID : B9ED9701E5E6E4D0A941

**c. Richard S Kozell III**

Mailing Address 353 US Hwy 1 #D106

City	State	Zip Code
Jupiter	FL	33477-5964

Purpose of Disbursement  
See Memo Entries

Candidate Name

Richard S Kozell III

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 25 / 2015

Amount of Each Disbursement this Period

4904.02
---------

Transaction ID : B45D00F1BA8D440B1B0C

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5619.78

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Richard S Kozell III**

Mailing Address 353 US Hwy 1 #D106

City	State	Zip Code
Jupiter	FL	33477-5964

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Richard S Kozell III

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2015

Amount of Each Disbursement this Period

1351.25
---------

Transaction ID : B5184F2A716DB4006895

[MEMO ITEM]

**B. USPS**

Mailing Address 643 U.S. 1

City	State	Zip Code
North Palm Beach	FL	33408-4630

Purpose of Disbursement  
Box Rental

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2015

Amount of Each Disbursement this Period

102.00
--------

Transaction ID : B77A7A5FF65A84431996

[MEMO ITEM]

**c. Republican Jewish Coalition**

Mailing Address 50 F St NW

City	State	Zip Code
Washington	DC	20001-1530

Purpose of Disbursement  
Sponsorship

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2015

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : BA18E2FF9C7764461809

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Expedia**

Mailing Address 333 108th Ave

City	State	Zip Code
Bellevue	WA	98004

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2015

Amount of Each Disbursement this Period

312.31
--------

Transaction ID : B57D7C4D67F2A44BE94B

[MEMO ITEM]

**B. Uber**

Mailing Address 182 Howard St #8

City	State	Zip Code
San Francisco	CA	94105-1611

Purpose of Disbursement  
Taxi Fare

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2015

Amount of Each Disbursement this Period

110.26
--------

Transaction ID : B8380AEABC60F41C0B33

[MEMO ITEM]

**C. Marriott International, Inc.**

Mailing Address 10400 Fernwood Rd

City	State	Zip Code
Bethesda	MD	20817-1102

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2015

Amount of Each Disbursement this Period

1432.44
---------

Transaction ID : B19F713632C9A4F348AB

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
See Memo Entries

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 12 / 2015

Amount of Each Disbursement this Period

11021.82
----------

Transaction ID : B5B4E3DF1D8E24BCD858

**B. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
E-Marketing

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 12 / 2015

Amount of Each Disbursement this Period

4494.82
---------

Transaction ID : BBB4E902F4DD49809D3

[MEMO ITEM]

**c. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

City	State	Zip Code
Alexandria	VA	22314-1547

Purpose of Disbursement  
Web Development

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 12 / 2015

Amount of Each Disbursement this Period

5702.00
---------

Transaction ID : BF6FBF523C32C410B9B9

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

11021.82

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address 1033 N Fairfax St #40

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		12		2015

City	State	Zip Code
Alexandria	VA	22314-1547

Amount of Each Disbursement this Period

825.00
--------

Purpose of Disbursement  
Web HostingCategory/  
Type

Transaction ID : BC19AA1A72F35446DA09

**[MEMO ITEM]**

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

45440.42





**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 68

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Armellini Express Lines, Inc.**

Mailing Address PO Box 678

City	State	Zip Code
Palm City	FL	34991-0678

Purpose of Disbursement  
Refund: Refund of Corporate Contribution

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 19 / 2015

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : BC0826B04FCD14A20901

**B. J.H. Iravani, Inc.**

Mailing Address 1934 Commerce Lane Ste 5

City	State	Zip Code
Jupiter	FL	33458-5576

Purpose of Disbursement  
Refund: Refund of Corporate Contribution

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 19 / 2015

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : B5D551514C29F4924BB1

**c. Forward Electric and Air Conditioning**

Mailing Address PO Box 2172

City	State	Zip Code
Jupiter	FL	33468-2172

Purpose of Disbursement  
Refund: Refund of Corporate Contribution

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 03 / 2015

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : BAA185FAEC11B4AA0BBE

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 68

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Rick Kozell for Congress

Full Name (Last, First, Middle Initial)

**A. Sailfish Media Integration**

Mailing Address 4480 SW Boatramp Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2015

City	State	Zip Code
Palm City	FL	34990-5303

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : B0514C1E9C2514A5BA67

Purpose of Disbursement  
Refund: Refund of Corporate Contribution

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Southeastern Door Company**

Mailing Address 1505 Commerce Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2015

City	State	Zip Code
Jupiter	FL	33458-8837

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : B1BAEDA57813D490EBAB

Purpose of Disbursement  
Refund: Refund of Corporate Contribution

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

1750.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 68 OF 68

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
Rick Kozell for Congress

Transaction ID : C6873E11FC8094727A35

LOAN SOURCE Full Name (Last, First, Middle Initial)

Richard S Kozell III

**[PERSONAL FUNDS]**

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

353 US Hwy 1 #D106

City

State

ZIP Code

Jupiter

FL

33477-5964

Original Amount of Loan

100.00

Cumulative Payment To Date

100.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M / D / Y  
06 / 30 / 2015

Date Due

M / D / Y  
12 / 31 / 2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.